

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	PH		12/1
FORMALITY REVIEW	DB	65378	01/19/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	2	✓	
2	3	✓	
3	4	✓	
4	5	✓	
7	6	✓	
5	7	✓	
6	8	✓	
8	9	✓	
9	10	✓	
10	11	✓	
11	12	✓	
12	13	✓	
13	14	✓	
14	15	✓	
15	16	✓	
16	17	✓	
17	18	✓	
17	19	✓	
18	20	✓	
20	21	✓	
22	22	✓	
22	25	0	
23	26	✓	
24	27	✓	
25	28	✓	
26	29	✓	
27	30	✓	
28	31	✓	
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36	39	✓	
37	40	✓	
38	42	✓	
39	43	✓	
40	44	✓	
41	45	✓	
42	46	✓	
43	47	✓	
44	48	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions
 staple additional sheet here

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